Case 16-15426-jkf Doc 26 Filed 04/25/17 Entered 04/25/17 15:34:05 Desc Main Document Page 1 of 4

Sill	in this information to identify your o	2250.				1			
	otor 1 Charlita A. A								
	otor 2 use, if filing)				_				
Unit	ted States Bankruptcy Court for the	e: _EASTERN DISTRICT	OF PENNSYLVANIA						
Cas	se number 16-15426					Check if this is	s:		
(If kn	own)		-				ent showing	g postpetition chapter ollowing date:	٢
<u>O</u> 1	ficial Form 106I					MM / DD/	YYYY		
So	chedule I: Your Inc	ome						12/	15
spoi	olying correct information. If you use. If you are separated and you has separate sheet to this form. Describe Employment	ur spouse is not filing w	ith you, do not inclu	de infor	mati	on about your sp	ouse. If m	ore space is needed	
1.	Fill in your employment information.			Debtor 1			Debtor 2 or non-filling spouse		
	If you have more than one job,	Employment status	■ Employed			☐ Emp	loyed		
	attach a separate page with information about additional	Employment status	□ Not employed			☐ Not €	employed		
	employers.	Occupation	Practice Coording	nator					_
	Include part-time, seasonal, or self-employed work.	Employer's name	Temple Hospital						
	Occupation may include student or homemaker, if it applies.	Employer's address	Philadelphia, PA	\					
		How long employed t	here? 10 Year	s					
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the case unless you are separated.	late you file this form. If	you have nothing to re	eport for	any	line, write \$0 in th	e space. In	clude your non-filing	
-	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	n for all	emp	loyers for that pers	on on the li	ines below. If you nee	€d
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5,618.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	

5,618.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Charlita A. Allen		(Case n	umber (<i>if kn</i>	own)	16-15	5426		
	Con	by line 4 here	4.		For I	Debtor 1 5,618	2.00		Debtor :		
_			4.	•	Ψ	3,010	.00	Ψ		IN/A	<u>\</u>
5.	List 5a.	all payroll deductions: Tax, Medicare, and Social Security deductions	5	a.	\$	1,084	.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans		b.	\$.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5	c.	\$.00	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	50	d.	\$	0	.00	\$		N/A	<u> </u>
	5e.	Insurance	5	e.	\$	601	.00	\$		N/A	
	5f.	Domestic support obligations	51	f.	\$	0	.00	\$		N/A	<u> </u>
	5g.	Union dues	5		\$.00	\$		N/A	_
	5h.	Other deductions. Specify: Pension	5I	h.+	\$.00	+ \$		N/A	<u>\</u>
		Parking			\$	89	.00	\$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,999	.00	\$		N/A	<u> </u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,619	.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0	.00	\$		N/A	.
	8b.	Interest and dividends	81	b.	\$.00	\$		N/A	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		c.	\$	0	0.00	\$		N/A	<u> </u>
	8d.	Unemployment compensation	80	d.	\$	0	.00	\$		N/A	<u> </u>
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 81		\$ \$	0	0.00	\$ \$		N/A	<u> </u>
	8g.	Pension or retirement income	8		\$.00	\$		N/A	_
	8h.	Other monthly income. Specify:	81	h.+	\$	0	.00	+ \$		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	0	.00	\$		N/	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2	,619.00	+ \$		N/A	= \$	3,619.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,013.00	. *-		-14/	_	3,013.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in <i>Schedu</i> and contributions from an unmarried partner, members of your household, your friends or relatives. In the contribution of the expenses that you list in <i>Schedu</i> and contributions from an unmarried partner, members of your household, your friends or relatives.	ur dep		,	,		,	Schedule 11.	_	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The re that amount on the Summary of Schedules and Statistical Summary of Certies							12.	\$Combi	3,619.00
12	Do :	you expect an increase or decrease within the year after you file this for	m2								ly income
13.		No. Yes. Explain:									

Fill	in this information to identify your case:				
Deb	otor 1 Charlita A. Allen		Che	ck if this is:	
				An amended filing	
	otor 2				wing postpetition chapter
(Sp	ouse, if filing)			13 expenses as of	the following date:
Unit	ted States Bankruptcy Court for the:EASTERN DISTRICT OF PENNS	YLVANIA		MM / DD / YYYY	
1	e number 16-15426				
(IT K	nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
Be info nui	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
١.	■ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	s for Separate Housel	hold of De	btor 2.	
2.	Do you have dependents? ☐ No				
۷.		Daman dantia nalatia		Dd	Dana danan dana
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		_ 1	Yes
				_	□ No
		Son		_ 7	■ Yes □ No
		Son		14	■ Yes
					□ No
				_	☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance i value of such assistance and have included it on <i>Schedule I:</i> ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$	\$	710.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		125.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as ho	me equity loans	4d. 9		0.00

Debtor 1	Charlita A. Allen	Case number (if known)	16-15426
6. Util	lities:		
6a.		6a. \$	300.00
6b.	•	6b. \$	100.00
6c.		6c. \$	375.00
6d.		6d. \$	
			0.00
	od and housekeeping supplies	7. \$	500.00
	ildcare and children's education costs	8. \$	400.00
	othing, laundry, and dry cleaning	9. \$	125.00
). Per	rsonal care products and services	10. \$	100.00
. Me	dical and dental expenses	11. \$	0.00
	insportation. Include gas, maintenance, bus or train fare.	12. \$	75.00
	not include car payments.	·	
	tertainment, clubs, recreation, newspapers, magazines, and book		175.00
	aritable contributions and religious donations	14. \$	0.00
	urance.		
	not include insurance deducted from your pay or included in lines 4 or		
	a. Life insurance	15a. \$	0.00
	b. Health insurance	15b. \$	0.00
15c	c. Vehicle insurance	15c. \$	135.00
	d. Other insurance. Specify:	15d. \$	0.00
. Tax	kes. Do not include taxes deducted from your pay or included in lines	4 or 20.	
	ecify:	16. \$	0.00
	tallment or lease payments:	47- 0	0.00
	a. Car payments for Vehicle 1	17a. \$	0.00
	o. Car payments for Vehicle 2	17b. \$	287.00
	c. Other. Specify:	17c. \$	0.00
	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did n ducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official		0.00
	ner payments you make to support others who do not live with yo		0.00
	ecify:	19.	0.00
	ner real property expenses not included in lines 4 or 5 of this forn		
	a. Mortgages on other property	20a. \$	0.00
	o. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
. Oth	ner: Specify:	21. +\$	0.00
2. Cal	culate your monthly expenses		
	a. Add lines 4 through 21.	\$	3,407.00
	 Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fe 		5,707.00
220	c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,407.00
. Cal	culate your monthly net income.	L	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,619.00
	o. Copy your monthly expenses from line 22c above.	23b\$	3,407.00
_00			3,401.00
230	c. Subtract your monthly expenses from your monthly income.		040.00
	The result is your monthly net income.	23c. \$	212.00
4 D.	various and an increase of degrees in the same and a second that the	veer effer you file this farm 0	
	you expect an increase or decrease in your expenses within the example, do you expect to finish paying for your car loan within the year or do you		se or decrease because of
	dification to the terms of your mortgage?	a expose your mongage payment to increa	so or accrease because or
	, 00		
□,	Yes. Explain here:		